

E-Mail Letter to WX and LEAD Contractors:

4-11-06

Dear Weatherization and LEAD Contractors:

Please find attached the Survey of Interest and Capacity for the Lead Hazard Control Grant Program (Round 13), associated worksheets, and sample letters. The purpose of the survey is to assess your interest, capacity, and ability to carry out a lead hazard control program in your service area. The survey also serves as the only means of applying for Round 13 lead hazard funds. It also provides CSD with critical information necessary to respond to HUD's Notice of Funding Availability. The survey is due to CSD by **5:00 p.m. on April 26, 2006**. Applications postmarked by April 26, 2006, but not physically received at CSD will not be considered.

The Survey of Interest and Capacity for the Lead Hazard Control Grant Program (Round 13), associated worksheets, and sample letters will be posted on CSD's website: <http://www.csd.ca.gov> (under Contractors Only – LEAD). Please send an e-mail response that you have received this message and the attachments.

Thank you for your consideration in participating in CSD's Lead Hazard Control Program.

*Kathy Ely, Program Manager
Lead Hazard Control Program
700 Norther 10th Street, Ste. 258
Sacramento, CA 95814
(916) 341-4341 phone/fax
kely@csd.ca.gov*

**Department of Community Services and Development's
Survey of Interest and Capacity
Lead-Based Paint Hazard Control Grant Program (Round 13)
April 11, 2006**

The Department of Housing and Urban Development (HUD) has published its Notice of Funding Availability (NOFA) for Round 13 Lead-Based Paint Hazard Control Grant Program funding opportunity. The amount of available funds is approximately \$84.9 million for Fiscal Year 2006. Grant award amounts shall be approximately \$1 million to \$3 million per grant. Approximately 32-40 grants will be awarded nationwide. HUD indicates that grant awards will be performance-based with a high level of oversight. The Department of Community Services and Development (CSD) intends to apply for Round 13 funding in the amount of \$3 million to continue its Lead Hazard Control Program (LHCP). CSD anticipates awarding a maximum of six to seven contracts limited to the five current Round 11 lead providers and adding one or two more weatherization contractors to the current Lead Contractor Network. Awarded contracts will be contingent on CSD's receiving an award from HUD, contractor's capacity to administer a lead program, current lead providers in good standing with CSD, and past CSD programmatic performance. The grant application is due to HUD by June 1, 2006, with an anticipated funding date of January or February 2007.

CSD is conducting this Survey of Interest and Capacity to assess the capacity and ability of CSD's current Weatherization Contractors to provide a LHCP in their target service area. The primary objective of CSD's LHCP is to provide long-term, cost-effective lead hazard control services in coordination with weatherization services to the maximum number of low-income households occupied by at-risk children under six years of age.

Weatherization Contractors are encouraged to complete this survey. It will be the only document used to apply for Round 13 LHCP funding. Weatherization Contractors should:

- Assess the ability of your agency to start up a Round 13 LHCP within 60 days from the fully executed contract in your target service area based on documented needs.
- Establish partnerships with local health and housing officials to provide LHCP services for the local affordable housing programs and high-risk housing units.
- Establish an outreach/education plan that promotes community awareness of lead hazards by reaching both a general audience and clients that receive lead hazard reduction services. Provide specific education to target clients on how to maintain their homes as lead-safe after services are provided.

- Commit to matching 10% of nonfederal funds and leverage 10% funds from other resources to the LHCP in two parts:

Part 1 – 10% from nonfederal sources such as State, local, charitable, nonprofit or for-profit entities, in-kind contributions, and owner contributions. Community Development Block Grant funds are the only Federal funds that may be considered part of the 10 percent matching contribution and only to the extent that they are specifically dedicated to and integrated into supporting the LHCP.

Part 2 – 10% from other resources such as LIHEAP/DOE, CSBG, other federally funded programs, State, local, charitable, nonprofit or for-profit entities, in-kind contributions, and owner contributions.

- CSD will use past performance data from prior LHCP and other CSD programs including audit findings, to evaluate contractor's ability to effectively operate a LHCP.

General Information

- Only those applications that meet the threshold review requirements will be rated and ranked. The maximum number of points to be awarded is 72, which includes two bonus points as described in Section III, Rating Factor II. A minimum score of 49 points is required for Round 13 participation.
- CSD may request additional information to appropriately evaluate your application.
- This Survey of Interest and Capacity is available to CSD's Weatherization Contractors that have capacity to administer a successful LHCP program.
- The scoring factors and requested information will be relied on and used by CSD in response to HUD's Notice of Funding Availability.
- If you are unable to obtain letters of commitment, memoranda of understanding, and other signed agreements as requested in this survey, you will have until May 15, 2006 to submit.
- Submit an original plus two copies of the application and all requested documents by **5:00 p.m., April 26, 2006**. Applications postmarked by April 26, 2006, but not physically received at CSD will not be considered. Applications must be received at the CSD address listed below:

Department of Community Services and Development
Attention: Dorcas Reyes-Fernandez, Lead Program
700 North Tenth Street, Room 258
Sacramento, CA 95814

- Applicants will not be given advice on how to respond to the rating factors. CSD will respond to questions concerning clarification of the contents of this application. Questions must be in writing and sent via e-mail to CSD's LEAD e-mail address at LEAD@csd.ca.gov or fax to (916) 341-4217, by April **19, 2006**. CSD will share its ongoing responses to questions with all Weatherization and LEAD Contractors by posting the responses on CSD's website: <http://www.csd.ca.gov> (under Contractors Only – LEAD).

CHECKLIST AND SUBMISSION TABLE OF CONTENTS CSD'S LEAD HAZARD CONTROL PROGRAM

This checklist and submission table of contents includes a listing of the required items needed for submitting a complete survey. This survey will be the only document used to apply for Round 13 LHCP funding. Please use this checklist as a guide to assist you in preparing the application.

Application and Submission Documents

- ☐ Application and supporting narrative response

Threshold Requirements

- ☐ Commitment to complete a minimum of 25 units
- ☐ Minimum staff requirements
- ☐ Letter of commitment from your agency establishing 20% matching/leveraging resources. The 20% matching/leveraging resource amount will be based on your total allocation.
- ☐ Past and Current Program Performance

Rating Factor Response (total of 72 points)

- ☐ Capacity of the Applicant and Relevant Organizational Experience *(25 points)*
- ☐ Collaboration Efforts *(17 points)*
- ☐ Lead Hazard Control Community Outreach and Education *(5 points)*
- ☐ 20% Matching/Leveraging Resources *(25 points)*
- ☐ Past and Current Program Performance

Rating Factor Response Documents

- ☐ Worksheet 1 – Key Personnel
- ☐ Worksheet 2 – Equipment Evaluation
- ☐ Worksheet 3 – Estimated Leveraging Resources
- ☐ Organizational Chart
- ☐ Resumes for Program Manager, Inspector/Risk Assessor, Supervisor
- ☐ Commitment Letter from local Childhood Lead Poisoning Prevention Branch
- ☐ Certifications for Inspector/Risk Assessor, Supervisor, Worker
- ☐ Agency Letter of Commitment
- ☐ Letter of Commitment, Memoranda of Understanding, Other Signed Agreements for All Other Leveraging Resources

Attachments

- ☐ Sample Agency Letter of Commitment from Round 11
- ☐ Sample CLPPP Letter of Commitment from Round 11

**CSD LEAD HAZARD CONTROL PROGRAM
ROUND 13
Survey of Interest and Capacity**

SECTION I: APPLICANT INFORMATION

1. Agency/Applicant: _____
2. Person completing this survey: _____
3. Title: _____ Phone: _____
4. Service Territory: _____

SECTION II: THRESHOLD REQUIREMENTS

1. Each agency participating will be required to provide lead hazard control services to a minimum of 25 units with an estimated budget of \$200,000. Approximately seventy-six percent of the budget must be dedicated toward direct hazard control services to include **only** the following activities: dust testing, inspection/risk assessment, abatement and interim controls, temporary relocation, and clearances. All other proposed activities will be considered program support or administrative costs such as screenings, training, outreach, intake, education, blood testing, insurance, and/or personnel costs.

The budget limitations are mandated by HUD's directives. As a result, the unit average for direct hazard control services is approximately \$6,300 per unit, representing an increase in unit average cost from Round 11. Administrative costs will be approximately 5%, and the amount for program support will be determined upon final determination of successful participants.

Based on this information, can your agency guarantee a commitment to complete at least 25 units within an estimated budget of \$200,000?

- ☐ Yes
☐ No

2. Your agency must demonstrate that it has sufficient qualified personnel or will be able to quickly retain qualified experts or professionals (within 60 days of the fully executed contract) to immediately begin implementation of CSD's LHCP. Each agency must have at a minimum the following personnel hired or to be contracted:

- Project Manager (minimum 1 staff, 2 years experience)
- Inspector/Risk Assessor (minimum 1 staff, 2 years experience)

- Supervisor (minimum 1 staff, 1 year experience)
- Worker (minimum 2 staff)
- Outreach Coordinator (minimum 1 staff)
- Administrative Support (minimum 1 staff)

a. Does your agency currently meet minimum personnel requirements?

- ☐ Yes
☐ No

b. If your agency does not currently retain these personnel, can your agency commit to hiring or contracting sufficient personnel within 60 days of the fully executed contract?

- ☐ Yes
☐ No

3. Each agency must match 10% nonfederal resources and leverage 10% other sources (see Worksheet 3 for more information on what qualifies as matching and leveraging funds). Can your agency guarantee a commitment to meet this established threshold?

- ☐ Yes
☐ No

4. As a past and current CSD Weatherization or LEAD Contractor, CSD will evaluate applicants on past and current program performance. Have you successfully met your contract benchmarks?

- ☐ Yes
☐ No

If you answered "No" to any of the questions except 2.a. above, your application will not be considered for participation.

SECTION III: APPLICATION REVIEW

Rating Factor I: Capacity of the Applicant and Relevant Organizational Experience (25 points)

1. This factor addresses your agency's organizational capacity necessary to timely implement CSD's LHCP activities and to successfully complete the program within a two-year time period. In this rating factor, CSD will consider:

- a. Your agency's recent, relevant, successful, and demonstrated experience to undertake LHCP activities. CSD will evaluate your agency's most current performance administering Round 11 LHCP, evaluating the following data: total number of housing units enrolled, assessed, completed, and cleared compared to contractual goals. If you are not a CSD LHCP contractor, CSD will evaluate your past and current CSD contractual performance evaluating the following data: total number of housing units weatherized, expenditures spent compared to contractual goals and any unresolved audit or monitoring findings. *(10 points)*
- b. Your agency must demonstrate that it has sufficient personnel or will be able to retain qualified experts or professionals and be prepared to perform lead-hazard evaluation, lead-hazard control services, and other proposed activities within 60 days of the fully executed contract. *(10 points)*
 - i. Complete **Worksheet 1** – For Key Personnel, submit resumes and certifications. If necessary, provide attached narrative response describing other organizations, entities, or personnel that will assist your agency in implementing the LHCP.
 - ii. Submit an organizational chart with the LHCP staff clearly identified.
2. A factor in quickly implementing CSD's LHCP is possessing sufficient operable equipment to perform lead-based paint/risk assessment inspections and having personnel/contractor adequately trained in its use. Complete **Worksheet 2** – Equipment Evaluation. *(5 points)*

Rating Factor II: Collaborative Efforts (17 points)

1. CSD intends to implement a program strategy that creates a referral system of eligible units from the local Childhood Lead Poisoning Prevention Program (CLPPP), other health care or housing agencies or health providers that serve children that will fit within the scope of CSD's program. It is CSD's objective to obtain 10% of its referrals from these entities. Your agency must demonstrate that it currently has a working relationship or plans to establish a working relationship with its local housing, health, and other similar entities that will support CSD's LHCP. *(10 points)*
 - a. Describe your agency's relationship to other HUD and federal or city/county housing rehabilitation programs and health programs such as CDBG, HOME, Cal HOME, CLPPP, code enforcement programs, emergency repair programs, and other programs that serve children. Include in the narrative response at a minimum the following key information:

- i. Explain how referrals of eligible units are obtained from CLPPP, health and housing agencies, and other agencies that serve children.
 - ii. List entities your agency currently has a partnership with in which LHCP units are referred for services, and describe the services requested, i.e., inspection, interim controls, etc.
 - iii. Describe funding received by your agency for housing rehabilitation for the purpose of serving low-income clients (indicate source of funds and amount) and how referrals of eligible LHCP units will be received from these internal resources.
 - iv. Describe what efforts will be taken to expand partnerships that will benefit the LHCP.
- b. If your agency currently does not have established partnerships with any of the agencies described above, describe what efforts your agency will take to form partnerships that will benefit the LHCP within 60 days from the effective date of the contract.
 - c. Include as attachments referral agreements, commitment letters, or other documents from entities that describe their participation in recruiting eligible units in CSD's LHCP.

Note: If you are unable to obtain letters of commitment, memoranda of understanding, and other signed agreements as requested above, please indicate that you are in the process of obtaining. You will have until May 15, 2006 to submit.

- 2. Demonstrate collaboration with the local CLPPP to assist with hazard control blood screening of children in the targeted units, and receiving and distributing lead poisoning prevention education materials to families in the targeted units. Submit a commitment letter from the local Health Department following the format in the attached letter obtained under the Round 11 application. (4 points)

Note: The letter of commitment can also serve to respond to number one above by incorporating referral language.

- 3. *Bonus Points (2 points)* – CSD is interested in your agency's creativity in maximizing internal and external resources that complement the LHCP. Please explain ways your agency will seek to use resources to assist with the LHCP. Assess your agency's current programs (except weatherization) and your community's local resources to see what LHCP activities can be integrated and/or coordinated.

Example: A copy of the lead-safe rental registry is provided periodically to the local, grassroots faith-based organizations in an effort to market lead-safe housing to their homeless clientele.

Example: Your agency provides housing counseling services to low-income clients seeking home ownership or rental services. Lead-hazard awareness education is integrated with counseling services.

Example: Your agency sponsors worker certification training to low-income clients seeking employment through the local unemployment office.

Rating Factor III: Lead-Hazard Control Community Outreach and Education (5 points)

CSD's objective is to increase community awareness of lead hazards by reaching both a general audience and clients that receive lead hazard reduction services (target clients) and to provide specific education to target clients on how to maintain their homes as lead safe after services are provided. Submit your agency's outreach/education plan, which must include at the minimum:

- a. Describe proposed methods of community education and outreach (door-to-door, presentations, training, broadcast media, mailings, etc.) to market the program and provide lead-hazard awareness. Description should include general and/or targeted efforts.
- b. Describe how lead-hazard control awareness and post-education will be delivered to target clients.
- c. Submit copies of proposed educational and outreach materials. Materials should be available in alternative formats to persons with disabilities and in other languages common to the community (to the extent possible).

Rating Factor IV: 20% Matching/Leveraging Resources (25 points)

This factor addresses your agency's ability to obtain other resources that can be combined with CSD's LHCP resources to achieve program objectives. Funding is a constraint for the LHCP; it is imperative to maximize the impact of grant dollars by targeting matching and leveraging resources adequately. Each agency must provide a matching/leveraging contribution of at least 20% of the total contract allocation (amount of contract to be determined). This may be in the form of cash and/or in-kind contributions (noncash) of services, equipment, or supplies allocated to the proposed program. Matching and leveraging resources must be dedicated to supporting the LHCP and consist of two parts:

Part 1 – 10% matching from nonfederal sources such as State, local, charitable, non-profit or for-profit entities, in-kind contributions, private donations, and owner

contributions. Community Development Block Grant funds are the only Federal funds that may be considered part of the 10 percent matching contribution, and only to the extent that they are specifically dedicated to and integrated into supporting the LHCP.

Part 2 – 10% leveraging from other resources such as LIHEAP/DOE, CSBG, other federally funded programs, and State, local, charitable, nonprofit or for-profit entities, in-kind contributions, private donations, and owner contributions.

- a. Complete **Worksheet 3** – Estimated Matching and Leveraging Resources. This will assist CSD in tracking the sources of matching and leveraging commitments that your agency has obtained.
- b. Submit a letter of commitment from your agency signed by an official of the organization legally authorized to make commitments on behalf of the organization. **You must submit the letter of commitment in order to receive points in this category.** Please include in the letter the majority of the same contents in the attached letter of commitment from Round 11. The agency letter of commitment should contain at a minimum:
 - Support of CSD's application to HUD and commitment to match 10% in nonfederal funds and leverage 10% from other sources.
 - Efforts to recruit from the low-income community to fill vacant positions within the agency.
 - Commitment to layer funds from weatherization and housing rehabilitation programs (CDBG, HOME, Cal HOME, etc.) and amount to be leveraged from housing rehabilitation programs, if applicable.
 - Experience to collaborate with local entities, commitment to participate in CSD's LHCP, and your agency's role/activities in the LHCP.
- c. Submit letter of commitments, memoranda of understanding, or other signed agreements from all other sources (public and/or private sources) as identified on Worksheet 3. The letters of commitment, memorandum of understanding, or other signed agreements must include the organization's name, the proposed monetary level of commitment, a description of the contributed resources, and their designated purpose, and must be signed by an official of the organization legally authorized to make commitments on behalf of the organization. Include their governing board's resolution authorizing the commitment, if relevant.

Note: If you are unable to obtain letters of commitment, memoranda of understanding, and other signed agreements as requested above, please indicate that you are in the process of obtaining them. You will have until May 15, 2006 to submit them.

Rating Factor V: Past and Current Program Performance

Events occurring in connection with programs under the control of your agency shall be used as the basis for point deductions if the events have had a detrimental effect on the program or CSD's ability to monitor the program, as determined by CSD. Events shall not result in the deduction of points if they have been fully resolved as determined by or to the satisfaction of CSD as of the application deadline.

Five points will be deducted for each category described below with a maximum total deduction of 10 points.

- a. Significant violation of the requirements of CSD's programs or programs of other public agencies such as the failure to adequately maintain books and records thereof, a pattern of failure to submit timely reports, etc.
- b. Unresolved audit or monitoring findings or adverse actions taken by CSD within the last three years.

SECTION VI: APPLICANT INFORMATION (NONRATED)

1. How many staff would you make available (attend certification training and apply for certification) to be certified as:
 - Inspector/Risk Assessor (5-day training course and an exam) _____
 - Project Monitor (4-day certification course and an exam) _____
 - Supervisor (2-day certification course and an exam) _____
 - Worker (3-day certification course, no exam) _____
2. CSD plans to coordinate with the State Department of Health Services to obtain data regarding the identified needs/problems of your service territory regarding:
 - a. The number and percentages of children less than six years of age with elevated blood levels, and
 - b. Housing market data relevant to specified target areas.

If your agency desires to submit information in addition to what we may collect, please do so. You may also submit other socioeconomic, environmental, or demographic data relevant to your targeted service area that demonstrates a need for lead-safe housing. (Please use a separate sheet of paper, and attach it to this Survey of Interest and Capacity. Charts/graphs and other types of material may be submitted as well.)

3. CSD estimates completing 275 - 300 units within a two-year period. Each agency is required to complete a minimum of 25 units with an estimated budget of \$200,000 (refer to Section II, Threshold Requirements #1 concerning budget limitations).

Please advise how many units your agency can feasibly provide lead hazard control services using the unit and funding amount for 25 units as a basis for each increment of 25 units.

Projected Unit Goals: _____

NOTE: The number of units will be determined by established need in the area and capacity.

SECTION VII: PARTICIPATION NOTIFICATION

Successful applicants will receive a letter from CSD's Lead-Hazard Control Unit indicating that they have been selected to participate under Round 13. Selection to participate under Round 13 is contingent on CSD's receiving an award from HUD. Upon notification of award, CSD will notify Round 13 participants with additional details regarding the effective start date of the grant and any additional data and information to be submitted to execute a contract agreement. A supplemental budget package will be provided after determination of the number of successful applicants.

Unsuccessful applicants will be notified that their application was not selected to participate and will be afforded an opportunity to request a consultation from CSD's Lead-Hazard Control Unit concerning reasons for denial within 14 days of denial. Because of the NOFA's time constraints, all of CSD's decisions are final, and no appeal process is available.

**SECTION VIII: GOVERNING BOARD AUTHORIZATION TO SUBMIT
SURVEY OF INTEREST AND CAPACITY**

Authorization to submit this survey and certification of information:

As the official designated by the governing body, I hereby certify that

Agency Name

- a. has been authorized by the Board of Directors to submit this application to the Department of Community Services and Development and, if selected, to participate in the Round 13 LHCP funded by the federal Department of Housing and Urban Development; and
- b. the information, statements, and attachments contained in the survey are, to the best of my knowledge and belief, true and correct. This survey will be part of the standard agreement with the Department.
- c. By submitting this survey, we are committed to participation in Round 13 LHCP, if selected.

Signature

Date

Attach a resolution from the Board of Directors that clearly designates the authorized individual who can sign the above certification. The resolution should also contain a statement similar to the one referenced above, indicating Board approval for participation in this project.

WORKSHEET 1, KEY PERSONNEL (ROUND 13)

(Note: Attach certification for those job titles with a "C". Attach resume for those job titles with an "R.")

JOB TITLES AND RESPONSIBILITIES	NAME(S) OF INDIVIDUAL(S)	AGENCY STAFF?	SUB?	% OF TIME	YEARS OF EXPERIENCE
R--PROGRAM MANAGER (MINIMUM 1 STAFF REQUIRED) Responsible for day-to-day project management. Supervises activities of the technical and support staff. Ensures that daily operations are conducted in accordance with HUD Guidelines, EPA, OSHA, and other federal, state, and local regulations. Establishes and maintains network contact with CSD. Assists in developing strategic plans and quarterly plans. Responsible for reviewing and submitting reports to CSD.		<input type="checkbox"/>	<input type="checkbox"/>		
<i>If not already hired, will this position be filled within 60 days?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No					
OUTREACH COORDINATOR (MINIMUM 1 STAFF REQUIRED) Participates in all community outreach and marketing strategy activities. Ensures all outreach and marketing objectives and goals are accomplished. Ensures that clients receive outreach education and completes applications. Assists clients in relocation needs and completes blood testing prior to the beginning of lead remediation. Prepares project case folders and inputs intake/application data.		<input type="checkbox"/>	<input type="checkbox"/>		
<i>If not already hired, will this position be filled within 60 days?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No					
C & R--INSPECTOR/RISK ASSESSOR (MINIMUM 1 STAFF REQUIRED) Holds current certification as a state Lead Inspector/Assessor. Conducts inspections/risk assessments according to HUD Guidelines and federal and state regulations.		<input type="checkbox"/>	<input type="checkbox"/>		
<i>If not already hired, will this position be filled within 60 days?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No					

JOB TITLES AND RESPONSIBILITIES	NAME(S) OF INDIVIDUAL(S)	AGENCY STAFF?	SUB?	% OF TIME	YEARS OF EXPERIENCE
C & R--SUPERVISOR/CONSTRUCTION SPECIALIST (MINIMUM 1 STAFF REQUIRED) Supervises crew workers on a project site. Prepares work specifications in accordance with findings of risk assessment reports. Responsible for security and administration of the HDP library specifications. Ensures the owner is aware of work specifications and shared work/costs for the project.		<input type="checkbox"/>	<input type="checkbox"/>		
<i>If not already hired, will this position be filled within 60 days?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No					
C--WORKER (MINIMUM 2 STAFF REQUIRED)	IDENTIFY 2 STAFF				
Holds current certification as a state Lead Worker.		<input type="checkbox"/>	<input type="checkbox"/>		
Follows policies and procedures for lead-safe work and clean-up.		<input type="checkbox"/>	<input type="checkbox"/>		
<i>If not already hired, will these positions be filled within 60 days?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No					
ADMINISTRATIVE SUPPORT (MINIMUM 1 STAFF REQUIRED) Assists with internal administrative grant operations. Manages the database system and maintains project files. Assists in the production of reports and serves as the day-to-day liaison with CSD.		<input type="checkbox"/>	<input type="checkbox"/>		
<i>If not already hired, will this position be filled within 60 days?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No					

WORKSHEET 2, EQUIPMENT EVALUATION (ROUND 13)			
EQUIPMENT*	OPERATING PROPERLY?	XRF LICENSE INFORMATION (SUBMIT A COPY)	TRAINING RECEIVED?
XRF**	<input type="checkbox"/> Yes <input type="checkbox"/> No	Radioactive Materials License #: _____ Exp. Date: _____ Last Resourced Date: _____ Licensed Individuals: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
XRF**	<input type="checkbox"/> Yes <input type="checkbox"/> No	Radioactive Materials License #: _____ Exp. Date: _____ Last Resourced Date: _____ Licensed Individuals: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No

* Equipment includes: XRFs, palm data recorders, digital cameras, etc.

** If XRF work is subcontracted by the agency, the entity selected must use an XRF to perform testing activities.

Worksheet 3, Estimated Leveraging Resources (Round 13)

Other funds obtained to support the LHCP may be considered matching/leveraging resources if they are used for any type of activity that benefits the dwelling being worked on and/or the client who resides there, even if the benefiting activity is not directly lead related. **Matching resources must be from nonfederal (10%) and other leveraging resources (10%) and must equal 20% of an agency's contract.**

Source of Leveraging (Letters of Commitment Required)	Check Type of Funding	Work to be Accomplished in Support of the Program Using the Leveraged Funds	Estimated Value
	<input type="checkbox"/> Federal <input type="checkbox"/> State <input type="checkbox"/> Local <input type="checkbox"/> Private <input type="checkbox"/> Owner <input type="checkbox"/> Donation <input type="checkbox"/> Staff In-Kind <input type="text"/>		\$ _____ OR % _____
	<input type="checkbox"/> Federal <input type="checkbox"/> State <input type="checkbox"/> Local <input type="checkbox"/> Private <input type="checkbox"/> Owner <input type="checkbox"/> Donation <input type="checkbox"/> Staff In-Kind <input type="text"/>		\$ _____ OR % _____
	<input type="checkbox"/> Federal <input type="checkbox"/> State <input type="checkbox"/> Local <input type="checkbox"/> Private <input type="checkbox"/> Owner <input type="checkbox"/> Donation <input type="checkbox"/> Staff In-Kind <input type="text"/>		\$ _____ OR % _____
	<input type="checkbox"/> Federal <input type="checkbox"/> State <input type="checkbox"/> Local <input type="checkbox"/> Private <input type="checkbox"/> Owner <input type="checkbox"/> Donation <input type="checkbox"/> Staff In-Kind <input type="text"/>		\$ _____ OR % _____
	<input type="checkbox"/> Federal <input type="checkbox"/> State <input type="checkbox"/> Local <input type="checkbox"/> Private <input type="checkbox"/> Owner <input type="checkbox"/> Donation <input type="checkbox"/> Staff In-Kind <input type="text"/>		\$ _____ OR % _____

COLLABORATIVE PARTNER SAMPLE LETTER

Jon Grant, Director
U.S. Department of Housing and Urban Development
Office of Healthy Homes and Lead Hazard Control
451 - 7th Street, SW, Room 8326
Washington, D.C. 20410

Dear Mr. Grant:

The (Name of County) County Department of Public Health is pleased to support the Department of Community Services and Development's (CSD) application for continued funding of the Lead Hazard Control Program. This application is important to us because it provides a vehicle to help us address the needs of lead-poisoned children in (Name of County) County.

Over the past _____ years, we have developed a positive working relationship with the Community Services Department's Lead Hazard Control Program. CSD has provided lead-hazard control work to the housing of children with EBLs in our case management. Thus, CSD has assisted in providing a solution to the lead-poisoning problem in (Name of County) County.

(Name of County) County receives \$_____ in State funds for our Childhood Lead Poisoning Prevention Program. This money is used for outreach and education, blood screening, and case management of children with EBLs in the County. The families of children in the units to be served with this grant proposal, as well as all families in the County, are the beneficiaries of this program.

(Name of County) County will commit to being a collaborative partner in this proposal by utilizing this funding to assist with the prehazard control blood screening of children in the targeted units, and to provide lead-poisoning prevention education materials for the Department of Community Services and Development to provide to the families in the targeted units.

Sincerely,

Chief of Community Health Services (or appropriate title)

SAMPLE LETTER OF COMMITMENT

Jon Grant, Director
U.S. Department of Housing and Urban Development
Office of Healthy Homes and Lead Hazard Control
451 - 7th Street, SW, Room 8326
Washington D.C. 20410

Dear Mr. Grant:

(Name of Your Agency) is pleased to support the Department of Community Services and Development's (CSD) application for continued funding of the Lead Hazard Control Program. This application is exciting because it continues the model of combining lead hazard control with our current Low-Income Home Energy Assistance Program and Department of Energy Low-Income Weatherization Assistance Program in targeted units. Even though our weatherization crews are working lead-safe, this layering of programs provides concurrent service delivery to our client base. This proposal to layer these programs could and should be replicated by our peers throughout California and the nation.

As a community-based organization serving low-income residents, (Name of Your Agency) makes every effort to recruit from our low-income community to fill vacant positions in the weatherization program. It is our practice to promote experienced weatherization staff to the lead hazard control crew. However, if this is not possible, we will recruit and train directly from our low-income client base to fill vacant positions in our lead hazard control crew.

(Name of Your Agency) has considerable experience in the area of lead hazard control. (Discuss your involvement in lead at the local level with other entities For example, you could say, “We have developed a close working relationship with our county health department and they refer cases of Children with EBLs to us for lead hazard control work.” If applicable, also say, “We also work with the local housing department and provide lead hazard control work to them for their projects regulated by Section 1012/1013.”) We currently employ (number) of lead-related construction professionals. They include (number) Inspector/Risk Assessor, (number) Supervisor, and (number) workers. We have provided lead hazard control work to (number of) residential units using (Round I, III,VII, XI or other sources of funds). We have also provided (number) Inspections/Risk Assessments of residential units using (name source(s) of funds).

(Name of Your Agency) appreciates the opportunity to serve our community by providing lead hazard control inspection and work concurrently with the installation of weatherization. With this funding, (name of Your Agency) will commit to combining the Lead Hazard Control Program with the LIHEAP and DOE WAP (you can add other internal resources of funding) in privately owned residential units targeting pre-1978 units with children under age six. (Name of Your Agency) will provide outreach and intake of households that meet the criteria of the Lead Hazard control Program. (Name of Your Agency) will also provide the residents with written and oral information on lead hazards and

provide referrals for the target-age children to receive blood lead testing. (Name of Your Agency) inspection staff will conduct the initial inspections/risk assessments, develop project designs, and complete clearance inspections. We will maintain lead hazard control crews with the proper State certifications to complete the work, separate from the inspection staff. In addition, we will work in partnership at the local level with the health and housing departments in identifying units to be served. (Name of Your Agency) will also cooperate with CSD in data and fiscal reporting, all monitoring, and quality control and quality assurance activities.

(Name of Your Agency) expects to match the proposed amount of our award with (a minimum of 10%) in nonfederal funds from (private utilities, local funding, in-kind contributions, owner contributions, CDBG funds). We also expect to leverage (a percent or amount) with (our weatherization funding, HOME funds).

(Name of Your Agency) looks forward to being a full partner in this continuing effort to provide lead hazard control services and add installing Healthy Homes measures in the homes of the low-income residents of our community. We take great pride in serving our community.

Sincerely,

(Signed by Executive Director)
(Agency Name)